

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: _____

PrimeVision Communications LLC

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): PrimeNet, PrimeVideo,

PrimeProtect, PrimeFone, PrimeWi-Fi

Address of Service Provider: 1485 North Park Dr. Weston, FL 33326

Name of Agent Designated to Receive

Notification of Claimed Infringement: Robert G. Allen

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

1485 North Park Dr.
Weston, FL 33326

Telephone Number of Designated Agent: (954) 515-0900

Facsimile Number of Designated Agent: (954) 515-0804

Email Address of Designated Agent: ballen@myprimevision.net

Signature of _____ Representative of the Designating Service Provider:

Date: 12/22/05

Typed or Printed Name and Title: ROBERT G. ALLEN

DIRECTOR, REGULATORY & GOVERNMENTAL AFFAIRS

Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee
Made Payable to the Register of Copyrights.

SCANNED 1/05/06

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